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## \* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/419,992 10/21/2002

## \* FOREIGN APPLICATIONS \*\*\*\*\*

## F REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

01/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	TX	15	31	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

23720

## TITLE

Keel guide system

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